## **COMMODITY FUTURES TRADING COMMISSION**

## FORM DCM

# CONTRACT MARKET APPLICATION OR AMENDMENT TO APPLICATION FOR DESIGNATION

## **COVER SHEET**

Bitı	nomial Exchange, LLC						
600	Exac O West Chicago Ave, S	ct name of Applicant Juite NL14, Chi		er			
		Address of principa	l executive offices				
	If this is an <b>APPLICATION</b> for designation, complete in full and check here.						
and o	If this is an <b>AMENDMENT</b> to an application, or to an existing designation, list all items that are amended check here.						
GENE	CRAL INFORMATION						
1.	Name under which the business of the designated contract market is or will be conducted, if different than name specified above (include acronyms, if any):  Bitnomial Exchange, Bitnomial, BTNL						
2.	If name of designated contract market is being amended, state previous designated contract market name:						
3.	Contact information, including	pecified above:					
	Number and Street						
	City	State	Country	Zip Code			
	Main Phone number	Fax					
	Website URL	E-	E-mail Address				

4.	List of principal office(s) and address(es) where designated contract market activities are/will be conducted:								
Office Prir		/	Address 600 West	Chicag	go Ave, 🤅	Suite NL14, Chic	ago, IL 60654		
5.	If A	applicant is a succe	ssor to a previo	usly design	nated contra	ct market, please comple	ete the following:		
	a.	. Date of succession							
	b. Full name and address of predecessor designee								
		Name							
		Number and Stree	et						
		City	State		Country	Zip Code			
		Main Phone Num	ber	Website	URL				
BUS	INES	SS ORGANIZA	ΓΙΟΝ						
6.	Apj	plicant is a:							
	Corporation Partnership Limited Liability Company Other form of organization (specify)								
7.		Date of incorporation or formation:							
8.		State of incorporation or jurisdiction of organization:							
	<ol> <li>Applicant agrees and consents that the notice of any proceeding before the Commission in connection with this application may be given by sending such notice by certified mail to the person named below at the address given.</li> <li>Luke Hoersten, President and CEO</li> </ol>								
Bitr	om	and Title ial Exchange	, LLC						
		pplicant est Chicago A	ve, Suite N	NL14					

Number and Street

Chicago	IL	60654
City	State	Zip Code

#### **SIGNATURES**

10. The Applicant has duly caused this application or amendment to be signed on its behalf by the undersigned, hereunto duly authorized, this <u>2nd</u> <u>day of September</u> , 20<u>16</u>. The Applicant and the undersigned represent hereby that all information contained herein is true, current, and complete. It is understood that all required items and Exhibits are considered integral parts of this Form DCM and that the submission of any amendment represents that all unamended items and Exhibits remain true, current, and complete as previously filed.

#### Bitnomial Exchange, LLC

Name of Applicant

Signature of Duly Authorized Person

## Luke Hoersten, President and CEO

Print Name and Title of Signatory